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PTO/SB/22 (10-07) Approved for use through 10/31/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number **Docket Number (Optional)** ON FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) MTN-027DV1CN FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) 10/602.544-Conf. #1211 Filed June 23, 2003 Application Number GROWTH DIFFERENTIATION FACTOR PROMOTER AND USES THEREFOR For **Art Unit** 1633 Examiner Long, S. This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): **Small Entity Fee** <u>Fee</u> One month (37 CFR 1.17(a)(1)) \$120 \$60 Two months (37 CFR 1.17(a)(2)) \$460 \$230 Three months (37 CFR 1.17(a)(3)) 525.00 \$1050 \$525 Four months (37 CFR 1.17(a)(4)) \$1640 \$820 Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number 41,710 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 December 10, 2007 Signatuh Date Jeanne M. DiGiorgio (617) 994-0882 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. 10602144 00000014 120080 Total of 12/11/2007 ATRINH forms are submitted.

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PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/602,544-Conf. #1211 ursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** June 23, 2003 TRANSMITTAL Filing Date Li-Fang LIANG First Named Inventor For FY 2008 **Examiner Name** Long, S. Applicant claims small entity status. See 37 CFR 1.27 1633 Art Unit TOTAL AMOUNT OF PAYMENT MTN-027DV1CN 525.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Check Other (please identify): 12-0080 Lahive & Cockfield, LLP X Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity Fee (\$) Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 310 155 510 255 210 105 Utility 210 105 100 50 130 65 Design 210 105 310 155 160 80 Plant Reissue 310 155 510 255 620 310 210 105 0 0 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims Extra Claims** Fee Paid (\$) **Multiple Dependent Claims** Fee (\$) 15 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) Fee (\$) 3 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$)

Other (e.g., late filing surcharge): 2253 Extension for response within third month					525.00
SUBMITTED BY					
Signature	Kanud Cins	Registration No. (Attorney/Agent)	41,710	Telephone	(617) 994-0882
Name (Print/Type)	Jeanne M. DiGiorgio			Date	December 10, 2007

Non-English Specification, \$130 fee (no small entity discount)